

Vol. 15, No. 7

WEEKLY REPORT

Week Ending February 19, 1966

U.S. DEPARTMENT OF HEALTH EDUCATION, AND WELFARE

PUBLIC HEALTH SERVICE

CURRENT TRENDS TEB 25 196

INFLUENZA IN THE UNITED STATES C LIBRARY Current Trends

Type B influenza virus has been ident AIDANT Aw22, GA more eastern States, Connecticut and Alabama. This brings to 6 the total of States in which the etiology of widespread or scattered outbreaks of febrile respiratory illness has been identified as influenza B, either through virus isolation or serological procedures (MMWR, Vol. 15, No. 6). Following recent notifications of increased amounts of febrile illnesses in one or more communities in New Hampshire, Vermont, New York, New Jersey and North Carolina, the respective State Health Departments are similarly investigating these influenza-like outbreaks. A total of 12 States in the eastern United States have

CONTENTS

now confirmed the presence of influenza B or are investigating suspected influenza.

Pneumonia-influenza mortality data from 122 cities in the United States does not demonstrate any excess on a national basis although the South Atlantic and East South Central Divisions, where influenza has been demonstrated, each show a slight increase above the (Continued on page 54)

CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES (Cumulative totals include revised and delayed reports through previous weeks)

Susping on the party of the last of the last	7th WEE	K ENDED	MEDIAN	CUMULA	TIVE, FIR	ST 7 WEEKS
DISEASE	FEBRUARY 19, 1966	FEBRUARY 20, 1965	MEDIAN 1961 – 1965	1966	1965	MEDIAN 1961 – 1965
Aseptic meningitis	24	21	19	180	194	164
Rrucellosis		4	5	23	26	39
Diphtheria.	3	4	4	19	22	38
			V 1/1			
	27	25		164	199	
Encephalitis, post-infectious	25	10	de contra	101	86	
Hepatitis, post-infectious Hepatitis, serum Hepatitis infectious	16	200	1	. 137	STATE AND ADDRESS OF THE PARTY	DAMAR.
Hepatitis, infectious	710	829	1,231	4,907	5,620	7,837
Measles (rubeola)	7.444	9,355	11,139	40,455	51,984	62,180
Poliomyelitis, Total (including unspecified) Paralytic	9105	131 1 Short L 1st 14	3	2	2	27
Paralytic	a recommendation	1	2	1	2	23
Nonparalytic Meningococcal infections Total	Law 10 House, made					20
Meningococcal infections, Total	107	110	49	547	496	377
Civilian Civilian	91	105	40	477		311
Military	16	105		70	476	CALIND CAY.
Civilian Military Rubella (German measles) Streptococcal sore throat & Scarlet fever	10	3			20	Mesocurus (et)
Crento-	1,440	10.000	10.000	7,042		
letanua sore unoat de beariet rever	12,219	12,023	10,323	70,425	74,792	64,114
Maronia	4	4	e in Milane	15	24	Merendina
Approid to	4	100		27	38	
Typhus, tick-borne (Rky. Mt. Spotted fever)	4	TO MILE TO ALL	1 1 1 1 1	33	46	48
Ton bothe (10x3. Mt. bpotted level).	**************************************	P. S. Contract of the second	4.1.2 P.C. A.L.I	7	6	surpressit.
Rabies in Animals						L.Chimerodia
Animals	71	85	65	503	659	445

NOTIFIABLE DISEASES OF LOW FREQUENCY

On the Basic, 2017	Cum.	The service of the relation of the service of the s	Cum.
Leptospirosis: Iowa-4 Malaria: Ohio-1, 1111, Ky1, Penn3, Puerto Rico-1 Psittacosis: Tenn1 Typhus, murine:	7 41	Botulism: Trichinosis: N.Y.C1 Rabies in Man: Rubella, Congenital Syndrome:	-

CURRENT TRENDS INFLUENZA IN THE UNITED STATES

(Continued from front page)

"epidemic threshold"; in the South Atlantic Division this increase is shown for the second week in succession. Mortality in the New England division which barely exceeded the "threshold" in the preceding week has now dropped back to the expected seasonal level.

(Reported by the Influenza-Respiratory Disease Unit, CDC.)

California

Reports from California indicate that nearly half of the counties in the State appear to be affected by influenza. In many of these counties school children are predominantly involved; in others the illness is now appearing in the adult population. The impact of the outbreak has been increasingly substantiated by school absenteeism of up to 40 percent and by absences through illness from commercial and industrial concerns.

Type A2 influenza virus strains have been identified in both northern and southern parts of the State, including San Diego, Los Angeles and Sacramento Counties. In other areas there has been serological identification of type A infections.

(Reported by Dr. Henry Renteln, California State Department of Public Health; and an EIS Officer assigned to the California State Department of Public Health.)

Washington

Isolated school-centered outbreaks of an influenzalike disease resulting in absenteeism considerably above seasonal levels have recently been reported in Olympia, Seattle, and Spokane. Type B influenza virus strains have been recovered from typical cases in one investigation, carried out in an Olympia school, where a study of unpaired acute-convalescent phase serum samples had shown evidences of type B infection. Investigation of the other outbreaks is underway.

(Reported by Dr. Ernest A. Ager, Chief, Division of Epidemiology, State Department of Health, Olympia, Washington; and an EIS Officer assigned to the State Department of Health, Washington.)

INFLUENZA LABORATORY FINDINGS

Influenza viruses isolated in various geographic areas of the world during the last several weeks have been predominantly type B. Preliminary hemagglutination inhibition tests to characterize these viruses have been completed and, although clearly related to viruses iso-

lated in previous years, the tests suggest an antigenic difference. It should be noted that extensive variation among type B viruses has been observed for the past few years, the significance of which is not clear at the present time.

Table 1
HEMAGGLUTINATION-INHIBITION TESTS WITH CURRENTLY PREVALENT TYPE B INFLUENZA VIRUSES

Till Co.	ANC N	Chicken	antisera	dimittee, infortunity
Virus Strains	B/Maryland/1/59	B/Taiwan/2/62	B/Singapore/3/64	B/Georgia/1/65
B/Maryland/1/59*	1280	<10	80	40
B/Taiwan/2/62	80	80	10	20
B/Singapore/3/64	1280	<10	80	40
B/Georgia/1/65	160	<10	20	80
B/Massachusetts/1/66	80	<10	10	20
B/Massachusetts/2/66	320	<10	10	20
B/Massachusetts/3/66	640	<10	10	40
B/Georgia/1/66	1280	<10	80	640
B/Georgia/2/66	160	<10	20	20
B/Georgia/3/66	1280	410 Sinkley (10	80	640
B/Georgia/4/66	80	<10	10	20
B/Georgia/5/66	80	<10	10	20
B/Great Lakes/1-7/66	160	<10	20	80

^{*}Type B influenza virus component in commercially prepared vaccines.

Homologous antiserum has been prepared with one of the strains currently active in the United States (B/Georgia/1/65, isolated in December) and typical results are shown in Table 1, using a number of strains isolated from cases in Massachusetts, Georgia and Illinois. It would appear that these currently active viruses are not a homogenous group with respect to their avidity for antibody and, until further tests are completed, it is not possible to place them in their proper antigenic relation-

ship to earlier viruses. However, they are clearly unlike the antigenic variant which appeared in Taiwan in 1962, and they have been readily identified using antiserum of high titer prepared with the B/Maryland/1/59 virus, the type B strain at present used in vaccine production in the United States.

(Reported by the WHO International Influenza Center for the Americas, Communicable Disease Center, Atlanta.)

MENINGOCOCCAL INFECTIONS

An additional 107 cases of meningococcal infection have been reported by State Health Departments this week, bringing to 547 the total of cases reported through the 7th week of 1966 (Table 2). The current reported incidence of meningococcal infections is shown in Figure 1 and is compared to 1965 as well as to the median for the period 1961-1965. The close approximation of the present curve to that of last year indicates that a period of continued high incidence may be expected for several weeks to come.

Table 2

MENINGOCOCCAL INFECTIONS – UNITED STATES

Total Cases Reported to CDC

1st Through 7th Week, 1964 to 1966

	1964	1965	1966
United States	377	496(20)*	547(70)*
New England	10	29 ′	36
Middle Atlantic	46	73	79
East North Central	55	63	88
West North Central	17	19	27
South Atlantic	85	104	94
East South Central	29	27	40
West South Central	50	65	67
Mountain	22	19	23
Pacific	63	97	93

Cases in Armed Forces reported through State Health Departments

The results of sulfadiazine sensitivity testings of strains of meningococci submitted to the Communicable Disease Center during 1965 and for the first 7 weeks of

1966 are shown in Table 3. The strains were submitted from States in all geographic areas of the United States and were isolated, with few exceptions, from the blood or cerebrospinal fluid of civilian cases.

Over 90 percent of the typable strains have been in serogroup B. During 1965, 65 percent of these strains were inhibited at the level of 1 mgm percent of sulfadiazine or less; thus far in 1966, 51 percent of the strains submitted have been inhibited at that level.

(Reported by Investigations Section, Epidemiology Branch, and General Bacteriology Unit, Laboratory Branch, CDC.)

FIGURE 1
MENINGOCOCCAL INFECTIONS BY WEEK OF REPORT
1965, 1966 AND MEDIAN, 1961-65

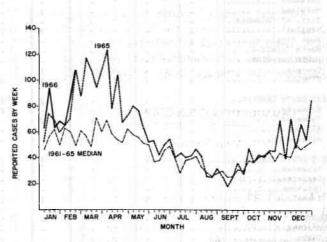


Table 3
MINIMUM INHIBITORY CONCENTRATION OF SULFADIAZINE AGAINST MENINGOCOCCI
Strains Submitted to the Communicable Disease Center

M.I.C., mgm%	.05	.1	.5	1.0	3.0	5.0	10.0	15.0	≥ 20.0	Total Strains
Jan Dec., 1965	1117 - 1	11		f		11			911 (21)	e dema
# of Strains	96	31	66	29	46	23	30	10	8	339
Cumulative Percent	28	37	57	65	79	86	95	98	100	
Jan. 1966 to Present		T							Cressore 1	0.00
" of Strains	16	5	19		5	6	13	2	12	78
Cumulative Percent	21	27	51	51	58	65	82	85	100	

Morbidity and Mortality Weekly Report

CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES FOR WEEKS ENDED

FEBRUARY 19, 1966 AND FEBRUARY 20, 1965 (7th WEEK)

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CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

FEBRUARY 19, 1966 AND FEBRUARY 20, 1965 (7th WEEK) - Continued

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Indiana	395	866	387	3	10	7	-		_		124
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Michigan	391	2,521	4,983	4	24	15		-		111111111	
Wisconsin	1,410	8,568	1,722	-	9	9				1	12
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e gross	-	34	185	2	7	19	-	-	-		
Florida	105	469	371	5	25	23	- 1	1-17			
AST SOUTH CENTRAL	530	4,850	2,592	10	40	27	_		_		
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Tennessee	95	1,867	1.71		22	8		1994	-	77311000	13
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Morbidity and Mortality Weekly Report

CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES FOR WEEKS ENDED

FEBRUARY 19, 1966 AND FEBRUARY 20, 1965 (7th WEEK) - Continued

AREA	STREPTOCOCCAL SORE THROAT & SCARLET FEVER	TET	ANUS	TULA	REMIA	ТҮР	HOID	TICK	S FEVER -BORNE . Spotted)	RABIE	
THE PARTY	1966	1966	Cum. 1966	1966	Cum. 1966	1966	Cum. 1966	1966	Cum. 1966	1966	Cum. 1966
UNITED STATES	12,279	4	15	4	27	4	33	228,320	7	71	503
NEW ENGLAND	1 602			- 1	11.0					10	1
Maine	1,603 216	1	2	1	1	1	2			1	4
New Hampshire	34							· .			-
Vermont					-	1.0					7 11
Massachusetts	17		1.		77	-		-		1-	4
	372	1	2	1	1	1 70		-		-	W. 44 .
Rhode Island Connecticut	78 886		1	- 1	I I	1	2				
MIDDLE ATLANTIC	379		3			1 1		40.4	Att. 1		
New York City	41	10.00	3	5 10 1		1	9		_	8	47
New York, Up-State.	249			-		1		100			
New Jersey	NN			177			2	-		8	45
Pennsylvania	89	1 3	=-1.01	I j		1	2 -	D. 1	1	3	2
AST NORTH CENTRAL	1,232		2.0	2	8		6	NAC MOVE	12.6	6	55
Ohio	112	11 -	-	Tail 1	3	27	3			1	31
Indiana	339		- 1.5	8 -	1		1	-0	VI .	2	9
Illinois	193		- 10	1	3	7 14	1	10.1	-1.1	1	3
Michigan	368		2 1 21	1	1 2	1 10	1	36.3	10	1	
Wisconsin	220)) -		1	1	19	i	45.8	deal I	1	6
EST NORTH CENTRAL	378	1	1	3	2	1 =	2	10.1	1 -	21	137
Minnesota	19	-	-	1 - 3		1.0				5	26
Iowa	155		- 0	23		U 1/4		100 I	61	3	26
Missouri	34	1	1	20 1 - II	- 9	1	1	21		8	59
North Dakota	95	_	1		4 - 2	- D		20 25			3
South Dakota	11			l = 2-11		- 8	12			3	16
Nebraska	8	_		- 1		_		1 2	3		
Kansas	56	-	-	3 - 1	2	-	1		1	2	2 5
OUTH ATLANTIC	1,264	-	3		5	7 1/5	8	G. 1	5	9	66
Delaware	12	-	- 1	- 1	-	119	-				11111
Maryland	229		_		_	- 13	-	F1 -	111		and the
Dist. of Columbia	31					_ c	-	11		Lincol 21	
Virginia	367	-			2	20	5		1	8	53
West Virginia	381			-	1		1				5
North Carolina	21	200	2.0		2		1	1000	3	1000	
South Carolina	45		1						1		5 0
Georgia	12	1/2	1	1 1		1		-	20.00		
Florida.	166	111	2 -		1 2	7 18	1		1 1	1	2
AST SOUTH CENTRAL	1,499		22	- 0	8	1	2			12	75
Kentucky	107	_			2	1	_	160	Fa	12	11
Tennessee	1,277		335		4	1	2	400		11	
Alabama	7	K _ 4			2	1	-	B	1	11	02
Mississippi	108	-	-	- 3	-	- 1W		12	1	Date + In	2
EST SOUTH CENTRAL	1,181	1	3	1	2	154	1	401.7		10	90
Arkansas	6	4 4		ı	1					10	8
Louisiana	5	-	2	1/2		10		A1			6
Oklahoma	4		1	12-1		C 16	1			1	7
Texas	1,166	1	1	1 - 3	1	- 100	The Man	MA _k E	ec	8	69
OUNTAIN	2,477	-	- 191	- L	-	10	2	1,031	ec 1	allery est	5
Montana	68		-	mark- 1		- 15	7 7-	122		144-14	1
Idaho	282	4			The second			400		KIND OF BUILD	s news
Wyoming	16			14.1	10.4.1	1		10.7			100
Colorado	1,600	J	102 5	- N		- 44	20-	March 1974	e Di Jes		form's
New Mexico	221		51.01	14 - 35	- 1	- 4				120	- 17
Arizona	55				at police.	1 1	1			State La	4
Utah	234	+	1.00		H	-20	4 mi	06		*******	4.0
mevada	- 1	1	116		111	1	1 7	65.93	i I	1	20.00
ACIFIC	2,266	1	3	ems - 20	1	27	4.7 161	EC DIG	150	4	24
Washington	760	13		1-10	113	0.1	13 E.		100		1
Oregon.	40		2	4 - 64		- 10.0		415 -4		12	-COB-
California	1,353	1	3	1. 2	1	0.00	1	12.1-1		4	24
Alaska	60	Grani III		12.1	10000	100 100	1 44				24
Hawaii	53			1. 3					1 7 7 7	200	200
									78		

Table 4. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED FEBRUARY 19, 1966

PORTEGE Y	All Ca	auses	Pneumonia	Under	20 mm - 10 mm - 10 mm	All Ca	uses	Pneumonia	Unde
Area	All Ages	65 years and over	and Influenza All Ages	l year All Causes	Area			and Influenza All Ages	1 yea
NEW ENGLAND:	823	512	53	39	SOUTH ATLANTIC:	1 2/0	704	76	70
Boston, Mass	294	168	12	15	Atlanta, Ga	1,349	704 92	76 11	79 19
Bridgeport, Conn	41	24	1	2	Baltimore, Md	292	145	won Edg	17
Cambridge, Mass	25	21	7	1	Charlotte, N. C	43	22		5
Fall River, Mass	30	17	3591	1 199	Jacksonville, Fla	60	24	4	5
Hartford, Conn	64	36	4	6	Miami, Fla	103	52	1	4
Lowell, Mass	28	8	55. X55-1,0	3	Norfolk, Va	49	22	7	4
Lynn, Mass	22	17	4	A.F. 1	Richmond, Va	94	55	6	6
New Bedford, Mass	28	22	3	1	Savannah, Ga	48	20	his basta 6	4
New Haven, Conn	50	31	2	1	St. Petersburg, Fla	108	87	6	1
Providence, R. I	73	46	6	4	Tampa, Fla	100	64	13	1
Somerville, Mass	20	14	1	- 7	Washington, D. C	194 65	87 34	8	9
Springfield, Mass	63 26	44 22	8	4	Wilmington, Del	nu = no.	34	Dr. Will But	4
Waterbury, Conn Worcester, Mass	59	42	4	1	EAST SOUTH CENTRAL:	747	439	63	27
Tester, Imas.		72		•	Birmingham, Ala	104	58	4	3
TIDDLE ATLANTIC:	3,652	2,163	193	168	Chattanooga, Tenn	74	37	7	4
Albany, N. Y.	48	29	200	4	Knoxville, Tenn	58	43	5	
Allentown, Pa	42	32	1	-	Louisville, Ky	183	109	24	5
Buffalo, N. Y	152	96	8	5	Memphis, Tenn	138	73		8
Camden, N. J	47	24	5	3	Mobile, Ala	34	21	at y tivyle.	940
Elizabeth, N. J	27	15	-	1	Montgomery, Ala	53	31	7	5
Erie, Pa.	42	29	3	2	Nashville, Tenn	103	67	9	2
Newark, N. J.	82 138	49 67	8 7	1 12	LIBET COUTH CENTRAL	1,209	626	72	74
New York City, N. Y	1,862	1,085	89	82	WEST SOUTH CENTRAL:	47	23	14	7
Paterson, N. J	33	20	3	2	Baton Rouge, La	27	16	1	1
Philadelphia, Pa	555	322	23	29	Corpus Christi, Tex	23	8	I I L L L L L L L L L L L L L L L L L L	1
Pittsburgh, Pa	229	141	9	5	Dallas, Tex	156	87	8	14
Keading, Pa	73	47	5	3	El Paso, Tex	41	21	4	3
Rochester, N. Y	93	67	10	6	Fort Worth, Tex	90	58	4	2
Schenectady, N. Y	25	16	1	-	Houston, Tex	222	101	10	12
Scranton, Pa.	32	17	3	3	Little Rock, Ark	56	35	5	2
Syracuse, N. Y	63	38	2	2	New Orleans, La	214	109	7	10
Trenton, N. J	45	29	5	4	Oklahoma City, Okla	87	41	to some	5
Yonkers, N. Y	36 28	24 16	7	3 1	San Antonio, Tex Shreveport, La	118 51 77	61 28 38	11 2	11 2
AST NORTH CENTRAL:	2,739	1,562	128	157	Tulsa, Okla	THE ALL PARTY	36	6	4
Akron, Ohio	52	34	-	2	MOUNTAIN:	467	262	34	30
Canton, Ohio	30	18	-	1	Albuquerque, N. Mex	45	26	9	2
Chicago, Ill.	781	415	53	48	Colorado Springs, Colo.	14	9	1	
Cincinnati, Ohio	206	135	6	10	Denver, Colo	119	66	6	9
Cleveland, Ohio	218	128	3	5	Ogden, Utah	24	12	4 5	1 3
Columbus, Ohio	140	86		15	Phoenix, Ariz	120	78	11	8
Dayton, Ohio	94 404	60 210	8	4	Pueblo, Colo	24 60	13 29	-	1
Evansville, Ind	39	210	22 3	19 1	Salt Lake City, Utah Tucson, Ariz	61	29	1 2	5 2
Flint, Mich	42	19	1	5	lucaon, Kilz.	Mary 12	1000	Of Table	1000
Fort Wayne, Ind	41	25	4	2	PACIFIC:	1,654	1,020	56	82
Gary, Ind	39	18	1	4	Berkeley, Calif	18	14	-	
Grand Rapids, Mich	39	24	4	2	Fresno, Calif	49	31	101	2
Indianapolis, Ind.	145	81	7	14	Glendale, Calif	32	26	1.00	Marin.
Madison, Wis	21	12	-	3	Honolulu, Hawaii	42	23		4
Milwaukee, Wis Peoria, Ill	130	68	3	9	Long Beach, Calif	61	34	2	1
Rockford, 111	38	27	-	1	Los Angeles, Calif	461	288	24	24
South Bend, Ind	32 56	20 36	2 5	4	Oakland, Calif	97 44	49 27	mand. I	13
Toledo, Ohio	115	73	4	6	Pasadena, Calif Portland, Oreg	133	85	N. July 3	8
Youngstown, Ohio	77	48		2	Sacramento, Calif	90	65	7	3
Commercial State Commercial Comme				1-	San Diego, Calif	100	55	4	6
EST NORTH CENTRAL:	963	597	41	38	San Francisco, Calif	243	146	3	9
Des Moines, Towa	54	39	2	1	San Jose, Calif. *	36	23		2
buluth, Minn,	39	26		- 5	Seattle, Wash	146	93	8	3
Mansas City, Kans	59	30	. 5	3	Spokane, Wash	57	36	1	4
Kansas City, Mo Lincoln, Nebr	161	98	3	6	Tacoma, Wash	45	25	1	2
"unneapolis, Minn,	42 99	31 59	2 2	2	Total	13 402	7 005	716	601
maha. Nebr.	77	50	4	3	Total	13,603	7,885	716	694
Louis, Mo	311	186	10	10	Cum	lative To	tals		
Paul, Minn,	84	59	2	3	including reported			revious we	eks
Wichita, Kans	37	19	11	1	A Charles of the Art White-		and and		100
CONTRACTOR OF THE PARTY OF THE					All Causes, All Ages			93,8/	3

EPIDEMIOLOGIC NOTES AND REPORTS MEASLES - Mason County, Kentucky

A measles immunization campaign was conducted in Mason County, Kentucky, during November and December, 1965 (MMWR, Vol. 14, Nos. 44 and 48). Including the 345 doses of live attenuated measles vaccine given in the initial phase of the campaign on November 2 and 3, a total of 702 doses had been given throughout the County by the end of December. This total includes over 90 percent of the susceptible elementary-school-age children.

During the second week in December an outbreak of measles started in a school in the village of Aberdeen, Brown County, Ohio, just across the river from Maysville in Mason County. Most of the service and shopping facilities for these two communities are in Maysville and there is considerable mixing of both populations.

As the school outbreak in Aberdeen progressed, the sickness absentee rate went up from an average of 20 to 50 students each day, the first and second grades being heavily affected in the early part of January. The kindergarten of 50 children was not affected by the outbreak; 20 of these children live in Maysville and had been immunized during the November campaign. The remaining 30 kindergarten children who lived in Aberdeen either had had measles or been immunized against it by their private physicians at the time of the Maysville campaign. Despite this outbreak in Aberdeen and the close association between the two communities, no further cases of measles occurred in Maysville.

Measles was again introduced into Mason County during December and 14 cases occurred subsequently among school and pre-school children in the Minerva School District. A pre-school child who was incubating measles came to live in this school district; this child infected a pre-school sibling and an aunt who was a second grade student. Thereafter, four other students in the first and second grades, five older children in the same school and three of their siblings of pre-school age, all developed measles. None of these 14 children had been immunized. Following this episode no additional cases have been reported to date in Mason County.

(Reported by Mr. J.R. Sills, Administrator, Mason County Health Department; Dr. Joseph W. Skaggs, Kentucky State Health Department; and an EIS Officer.)

THE MORBIDITY AND MORTALITY WEEKLY REPORT, WITH A CIRCULATION OF 15,300, IS PUBLISHED AT THE COMMUNICABLE DISEASE CENTER, ATLANTA, GEORGIA.

CHIEF, COMMUNICABLE DISEASE CENTER CHIEF, EPIDEMIOLOGY BRANCH ACTING CHIEF, STATISTICS SECTION

A.D. LANGMUIR, M.D. 1DA L. SHERMAN, M.S.

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IN ADDITION TO THE ESTABLISHED PROCEDURES FOR REPORTING MORBIDITY AND MORTALITY, THE COMMUNICABLE DISEASE CENTER WELCOMES ACCOUNTS OF INTERESTING OUTBREAKS OR CASE INVESTIGATIONS WHICH ARE OF CURRENT INTEREST TO HEALTH OFFICIALS AND WHICH ARE DIRECTLY RELATED TO THE CONTROL OF COMMUNICABLE DISEASES. SUCH COMMUNICATIONS SHOULD BE ADDRESSED TO:

THE EDITOR
MORBIDITY AND MORTALITY WEEKLY REPORT
COMMUNICABLE DISEASE CENTER
ATLANTA, GEORGIA 30333

NOTE: THE DATA IN THIS REPORT ARE PROVISIONAL AND ARE BASED ON WEEKLY TELEGRAMS TO THE CDC BY THE INDIVIDUAL STATE HEALTH DEPARTMENTS. THE REPORTING WEEK CONCLUDES ON SATURDAY: COMPILED DATA ON A NATIONAL BASIS ARE RELEASED ON THE SUCCEEDING FRIDAY.

